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	1000		First Name	ed Inventor	Stephen M.			
	DECLAR	ATION	COMPLETE IF KNOWN					
			Application	Number	08/850,508			
Declarati	Ι ΔΙ	Declaration	Filing Date	Filing Date				
Submitte with Initia		Submitted After Initial Filing	Group Art					
			Examiner					
As a below named inv	ventor, I hereby decla	re that:	<u> </u>					
My residence, post of	fice address, and citiz	enship are as stated below n	ext to my name.	· ·				
I believe I am the origi	inal first and sole inv	entor (if only one name is list	ed below) or an original fi	rst and injut inventor	r (if nlural names			
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Number 08/	⁷ 850,508	and was amended on (M	M/UU/YYYY)		(if applicable).			
I hereby state that I ha	ave reviewed and und	derstand the contents of the a	bove identified specificati	on, including the clai	ims, as amended by any a			
specifically referred to								
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I acknowledge the du	ty to disclose informat	tion which is material to pater	ntability as defined in Title	37 Code of Federal	Regulations, § .56.			
I hereby claim foreign certificate, or \$365(a)	priority benefits unde	er Title 35, United States Cod	e §119 (a)-(d) or §365(b) of ated at least one country (of any foreign application	ation(s) for patent or invent			
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DECLARATION						Page 2							
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	d inventor, I hereby appoint to Office connected therewith:	ne following	allomey(s)	and/or	agent(s)	to prosecut	e this a	pplication and	d to transact a	ll business in th	e Pater	nt and	
Fisher, Christen & Sab				ol	Payor Number (if applicable)								
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Please direct all correspondence to: Name			Virgil H. Marsh										
Address	Fisher Obsider 9 Cohel												
Address	Suite 300, 1019	19th St	reet, N	.W.				•					
city Washington				State	D.C				zip 200				
Country USA Telephone (202)659-2000 Fax (202)659 Thereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belie								2)659-20		1- K-			
true; and fi	urther that these statements made ent, or both, under Section 10 issued thereon.	vere made v	rith the kno	wledge	that willf	ful false state	ements	and the like s	o made are po	unishable by fin	e or		
Name of Sole or First Inventor:						A petition has been filed for this unsigned inventor							
Given Name	Stephen	Middle Initial			M.		Family Foster			Suffix			
Inventor's Signature				-	Date								
Residence: City	Kennett Square	1	State	PA		Country	U.S	S.A.		Citizenship	U.S	3.A.	
Post Office	Address: 242 No.	th This	tle Dov	vn									
City	Kennett Square	State	PA		Zip	193	48	Country	U.S.A.	Applicant Authority			

Additional inventors are being named on supplemental sheet(s) attached hereto